_ &	
CTS NO.	
REGIONAL NO.	
CATEG. CODE:	

Consumer Complaint Form

t Form

1. Please be sure to complain to the company or individual before filing.

2. Please type or print clearly in dark ink.

3. Incomplete or unclear forms will be returned to you.

4. Make sure you enclose copies of important papers concerning your transaction.

CONSUMER FRAUD \* CHICAGO \*

DEC 0 - 7003

	Consumer		
Name:_ Day Telephone: Address:	Senior Citizen? 口 Yes 囟 No Night Telephone: City:	State:	Zipi <b>l</b>
Vista A			
Name of Seller or Provider of Services: <u>Kids</u> , <u>C</u> Address: <u>6510 N. Lincoln Avc</u> .  Telephone: <u>973-575-7300</u>	om city: <u>Lincolnwood</u> -	State: /L	_ Zip: <u>(6071)</u>
Name of Other Seller or Provider of Services:			
Address:	_City:	State:	Zip:
Telephone:	_		
Date of Transaction: 10-12-2003  Did you sign a contract? ☑Yes □ No	Cost of Product: #593		Credit Card
Was product or service advertised? ☐ Yes ☑ No	Where?		
Type of Complaint (e.g. car, mail order, etc.) please provi	de details on reverse side:	Contackd 1 by mail	15
Have you complained to the company or the individual?	¶Yes □ No	Date: _/	ov. 10,2003
How? X By Phone ☐ By Mail ☐ In Person X Other _	E-mail:		·
Person Contacted: Uch Volght	Job Title: Vice Dres	ident	,
Nature of Response: Denid Kehnd	E	Date:	00.14,2003
Has matter been submitted to another agency or attorney  If yes, give name and address: 1 BBB of  2. Ederal Ti	Chicago &N. IL	Linois 330 Sk	N. Wabash 2006
		Ĉh	icago, IL laxol
Is court action pending? ☐ Yes ※ No			0

* *	Fill out a co	mplaint if about a motor vehicle or appli	ance
ake:		Model:	Year:
eage:		Purchased: ☐ New ☐ Used	Sold: ☐ With Warranty ☐ As Is
fly describe your complain	nt.We were S	enta letter from Kids Con	m Stating they were
skreskel in our	r daughter	for modeling When we	got there, it was very
an Anssur S	ales à un	Signed a Contract new o	or firget it. We were
		hen I did do research	
nings about t	his Compai	ry. Such as they have	Changel names Seve
pres a Continu	4 to ao	business the Same way	1. In whaid its a
radulent Ci	impany.	0.1	1
at form of relief are you se	eking (e.g. exchang	e, repair, refund, etc.)? <u>Refuncl</u>	
no referred you to this office	16 000		
ю referred you to this office	?? IVO ENE		<del></del>
			•
AD THE FOLLOWING BE			
		IES of any papers involved (contracts, warra O NOT SEND ORIGINALS.	anties, bills received, canceled
order to resolve your compl	laint we may send a	copy of this form to the person or firm you	are complaining about.
signed to protect the public legal rights or responsibilit	from misleading or utiles, I should contact	ney General is not my private attorney, but runlawful business practices. I also understate a private attorney. I have no objections to the directed against. The above complaint in	and that if I have any questions concerning the contents of this complaint being
	i.		
nature:_		Da	ate:
	Have you en	closed copies of important papers?	A DETRICE
	Return to:	Office of the Attorney General Lisa M	SPRINCFIELD, ILLINUS uspipel
		Consumer Protection Division 500 South Second Street	CCD 0 3 5003
•		Springfield, IL 62706 217/782-1090 or 800/243-0618	

CONSUMER PROTECTION DIV